## DRAFT MINUTES

## CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC)

Location: Hunter's Ambulance, 450-478 West Main Street, Meriden, CT September 8, 2016

Member Attendees: Richard Kamin, Kyle McClaine, Jim Castellone (phone), William Begg, James Parker

Guests: Raffaella Coler, Joe Larcheveque, David Baily, Sean Fitch, Glenn Arremony, Greg Allard, Nancy Brunet, Ryan Coughlin, Michael Zacchera, Jim Santacroce, Peter Canning, Gary Hebert, James Brubaker, Christopher Tremblay, Bill Scheitinger, Michael Zanker, Wesley Young, Blair Bamforth, Paul Rabeuf

Chaired by: Kyle McClaine, Richard Kamin

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:00 am	Meeting called to order at 10:00 am  The minutes of the August 2016 CEMSMAC meeting were reviewed	
Regional MAC Reports (regional reps)	Region 1: No Report Region II: No Report Region III: No Report Region IV: Region 4has not met, but four sponsor hospitals have planned train the trainer sessions and have begun to	

	review State protocols with their services  - expected to begin implementation on schedule  Region V:  Last meeting June/ next meeting September  State protocol Region V guidance  SMR Research needs local IRB approval  Compliance with state QI rollout  BLS Albuterol tabled	
DPH/OEMS Report	Distributed Additionally:  Everbridge reports distributed  Liscensing currently 4-6 weeks out  Recent cases regarding EMS providers working outside of the EMS system  Naloxone for Law Enforcement  Concern for LEO that are not formal components of the EMS system  OEMS does not have oversight for non EMS services  EMR/EMT tests are at printers	<ul> <li>Please maintain attention in order to decrease incidence of this problem</li> <li>CEMSMAC Chairs to pen letter to Commissioner of DESPP to discuss issue and hopefully prompt process development and/or promulgation to address issues raised</li> </ul>
Connecticut Unified EMS Protocols	<ul> <li>Protocol Subcommittee Formation</li> <li>Leadership – Begg, Gallo, Bailey</li> <li>Will evaluate potential changes to Statewide Protocols</li> <li>Membership will be based on pending proposed EMS Regulations</li> <li>Subcommittee will be open</li> </ul>	<ul> <li>Process of Subcommittee will be developed for sake of ongoing consistency and transparency</li> <li>Will make ask to Helicopter EMS providers in CT (currently two) regarding differences in field EMS Operations – based on desire to have gap analysis between ground</li> </ul>

	<ul> <li>Discussion will be inclusive but voting will be left to Subcommittee members</li> <li>Emergency changes will be dealt with electronically as needed</li> <li>Triage process for protocol changes needed – with colors assigned to help track</li> </ul>	<ul> <li>Paramedics and HEMS providers</li> <li>Changes to Protocols already in process – see table below for change types</li> <li>Changes being tracked currently by OEMS</li> </ul>	
EMS Destination Guidance	Awaiting guidance from OEMS	Will remain on agenda	
Sponsor Hospital Quality Assurance Process	A number of examples gotten from NASEMSO Medical Director Council email list.	Will create draft and present to group	
Discussion regarding EMS Management of Cavitary Wounds	Discussion on need to create education to best describe how to perform hemorrhage control and wound packing	Bailey and Kamin to work on drafting content for education along with State Education and Training.	
Revision Of State DNR/Discontinuation Of Resus Document (Kamin/Bailey)	Updated document/guidance needed	Will look to New Hampshire and Maine and well as potential for New England Unified guidance	
Fire rehab – (Bailey)	<ul> <li>Process from HH discussed– every patient going through fire rehab gets contacted by EMS</li> <li>Review rehab document already out from OEMS previously</li> </ul>	<ul> <li>By next meeting how to move forward with fire rehab – can we do it, do we need state protocol for medical monitoring</li> <li>OEMS - Question need for Policy vs protocol RECC TO SUSPEND PRACTICE until clarified</li> </ul>	
Downgrade from BLS to ALS (Bailey)	Discussion regarding potential need to develop protocol to guide downgrade process in state	Will go to Protocol Subcommittee	
<ul> <li>Meeting Locations For Upcoming Year:</li> <li>Oct. 2016 - CHA</li> <li>Nov. 2016 - Hunter's Ambulance</li> <li>Dec. 2016 - Hunter's Ambulance</li> </ul>			

<ul> <li>Jan. 2017 - CHA</li> <li>Feb. 2017 - Hunter's Ambulance</li> <li>Mar. 2017 - CHA</li> <li>Apr. 2017 - CHA</li> <li>May 2017 - CHA</li> <li>Jun. 2017 - Hunter's Ambulance</li> <li>Jul. 2017 - CHA</li> <li>Aug. 2017 - CHA</li> </ul>		
EMS Hand-off Process (Begg/Saxe)	More information expected in future	Dr Begg named liaison to EMS directors group
Mobile Integrated Healthcare (Bailey/Group)	<ul> <li>Population Health Committee         physician Chair has reached out to         committee</li> <li>Contact person: Madeleine         Biondolillo, MD Vice President,         Population Health Management;         CHA. Biondolillo@chime.org</li> </ul>	
SCT Review Process	Desire to bring back onto agenda	Will be placed on October agenda
Adjourned	Next meeting: October 13, 2016 – CHA	

## Types of CT Statewide Protocol Changes COLOUR TYPE

DEFINITION

GREEN	TECHNICALCORRECTION	SPELLING, GRAMMATICAL, BROKEN OR BAD HL
YELLOW	CONTENT CORRECTION	CORRECTION OF CONTENT (RESPIRATORY RATE, MED DOSAGE, ETC)
ORANGE	RELEASE CHANGE	MAJOR CHANGE THAT WILL TAKE PLACE IN NEXT REGULAR REVISION CYCLE.
RED	CRITICAL CHANGE	IMMEDIATE BASED ON CHANGE IN PRACTICE OR PIECE OF EQUIPMENT

Respectfully submitted: Richard Kamin MD, Kyle McClaine MD